Health, Wellness and You

March 2024





"Health, Wellness and You" is the member newsletter for McLaren Health Plan Inc. Medicaid, Healthy Michigan, Individual and Community members, collectively referred to as "members." It is published twice per year by McLaren Health Plan Inc., which shall be referred to as "MHP" throughout this newsletter.

TABLE OF CONTENTS

Customer Service	4
From Nancy Jenkins	5
MHP Health Equity Officer, New Member Survey	6
MHP+ANC Partnership	7
MHP Partners With Farmers Markets, Stay In Touch Survey	8
MHP Free Programs	9
Health and Wellness For Women	. 11
HIV Prevention, Online Health Tools	12
Suicide Prevention, Dental Changes, Quality and More	. 13
Cultural and Linguistic Appropriate Services	.14
Patient Advocate and Advance Directive, MHP Care Decisions	.15
National Minority Health Month	16
Help Prevent Fraud, Waste and Abuse	. 17

We want to answer your questions and help you get the care vou deserve. Please call Customer Service if you have questions about the content of this newsletter, need a printed copy of anything on our website or need verbal help with the provider directory. We've recently updated member handbooks and would be happy to send you a printed copy upon request. We have free interpretation and translation services available. Call 711 to access the TTY line if you are deaf, hard of hearing or have speech problems. Michigan Relay will assist you. This service is available 24 hours a day. Call us if you have special vision needs. We also have self management tools that could help. We are interested in learning if these tools meet your needs. Call us and let us know if you have used them and if they have helped you.

Customer Service

Monday through Friday, 8 a.m. to 6 p.m. 888-327-0671 (TTY: 711) Fax: 833-540-8648

Online

www.McLarenHealthPlan.org

Click on Contact Us in the Featured Links section on the Home Page.

Our website has been redesigned with you in mind! McLaren Health Plan updated www.McLarenHealth Plan.org to make information easier to find. It also includes useful member information, such as our Privacy Notice; provider directories; Rights and Responsibilities statement; healthy reminders; services covered by McLaren Health Plan; what to do when you need a medication; information about our quality programs; our Clinical Practice Guidelines and much more.

McLaren CONNECT is our member portal. Once you register, you can check your coverage and benefits, review claims, view and print ID cards, search the provider directory and more. The portal is easy to use. The Quick Links tab allows for easy access to Frequently Asked Questions, how to change your PCP, make payments and contact Customer Service. To register or sign in, go to www.mclarenhealthplan. org and click "Sign in or Register" in the upper right hand corner. If you need help, call Customer Service: 888-327-0671 (TTY: 711).

Member Handbooks

Your McLaren Health Plan member handbook is available on our website. Go to McLarenHealthPlan. org, click on Member, click on Communications, then find your plan specific handbook. The handbooks are updated annually and include benefit details about your plan. For a complete list of your covered benefits and exclusions from coverage, please refer to your Certificate of Coverage and any applicable riders. Call Customer Service if you would like a printed copy of any of your member materials.

Mail

McLaren Health Plan G-3245 Beecher Road Flint, MI 48532

If you need to make a payment, please mail it to the appropriate lockbox listed below:

MCLAREN HEALTH ADVANTAGE

P.O. Box 771981 Detroit, MI 48277-1981

MCLAREN HEALTH PLAN

P.O. Box 771982 Detroit, MI 48277-1982

MCLAREN HEALTH PLAN COMMUNITY

P.O. Box 771983 Detroit, MI 48277-1983

Address Update

Medicaid beneficiaries: Please report any change in phone number, email or address to the Michigan Department of Health and Human Services (MDHHS). You can do this by going to www.newmibridges.michigan.gov. You will need to create an account if you don't have one by choosing Register. Please report changes in both the Profile section and the Report Changes section. Your local office will use the Report Changes area to update your address for your case.

All other McLaren Health Plan members: Please report any changes in phone number, email or address to Customer Service by calling 888-327-0671 (TTY: 711).

WELCOME!

From Nancy Jenkins, President and CEO of McLaren Health Plan

It's finally spring and time to get outside and enjoy the weather! Take a walk, go to a park or simply sit outside in the fresh air – I know I'm enjoying the additional daylight we get every day.

Spring is also a time of renewal. Speaking of renewals, you may be eligible to renew your Medicaid status with the Michigan Department of Health and Human Services (MDHHS) and choose your health plan. This is called redetermination and it's been happening since the Public Health Emergency, or PHE, ended almost a year ago.

If you've already completed the redetermination process, great! If not, please return your paperwork to MDHHS. It's important so you or your family members continue to receive Medicaid benefits if you are eligible. There are places you can go all over Michigan if you need help with your renewal paperwork. You can visit www.michigan.gov/mibridges or call McLaren Health Plan Customer Service at 888-327-0671 (TTY: 711) to find a Community Navigator near you or find them online at https://www.mclarenhealthplan.org/mclaren-healthplan/events.

Yours in good health, Nancy



MHP HEALTH EQUITY OFFICER ANNOUNCED



Yvanna Marlin-Guanga is the first-ever Health Equity Officer at McLaren Health Plan. The position was created to advance health equity and address social, health and racial inequities in the communities it serves.

"Diversity, equity and inclusion have long been part of our culture at McLaren Health Plan," said Nancy Jenkins, president and CEO. "Creating and formalizing the position of Health Equity Officer marks another step forward in our pledge to embed diversity, equity and inclusion in everything we do."

Mrs. Marlin-Guanga is a health communication leader with more than 10 years of public health and health equity experience. She is responsible for defining, implementing and administering unified strategies to identify and eliminate health care disparities, achieve equitable access and support the diverse cultural, language, economic, education and health status needs of members and communities.

The Michigan Department of Health and Human Services recently announced the selection of Marlin-Guanga to its first ever Social Determinants of Health (SDOH) Advisory Council. The council reflects the perspectives necessary for an inclusive, community-driven approach to SDOH and will guide the implementation of the SDOH Hub pilot projects and develop recommendations for future iterations of the group's work.

"I am thrilled to join the McLaren Health Plan team and also to be chosen for the SDOH Advisory Council," said Marlin-Guanga. "I feel fortunate to lead the strategy for a mission-driven organization and champion efforts to remove barriers to care and help people thrive. I am looking forward to helping our members and staff as well as the communities we serve achieve their best health."

ARE YOU A NEW MHP MEMBER?

Welcome to McLaren Health Plan. If you are new to McLaren Health Plan, we want to know more about you and how we can better serve your health needs. Please answer a few questions about your health history on our New Member Survey. It only takes a few minutes! Call Customer Service at 888-327-0671 (TTY: 711) for more information. OR use the QR code below to take the survey:



MHP + ALLEN NEIGHBORHOOD CENTER = A 'PLUS' FOR THE COMMUNITY



McLaren Health Plan has entered into a fiveyear partnership with the Allen Neighborhood Center (ANC) in Lansing as a naming sponsor of its multi-use great room. "Hosted by McLaren Health Plan," the great room is home to the center's indoor Farmer's Market, weekly Breadbasket food pantry and much more.

The ANC serves as a dynamic hub where Lansing eastside neighbors access resources to improve their health and well-being; expand their capacity to seize job and entrepreneurial opportunities; create a strong sense of place, belonging and community pride, and build a safe, sustainable and thriving neighborhood.

"We are fortunate to have such a wonderful partnership with the ANC," said Tasha L. Oliver, director of Medicaid Programs at McLaren Health Plan. "Their ability to build a deep sense of belonging and community pride in the neighborhood is remarkable and I'm excited to continue working with them to help bolster their efforts."

Check out the programs and services offered at the ANC at www.allenneighborhoodcenter.org.

MHP PARTNERS WITH FARMERS MARKETS



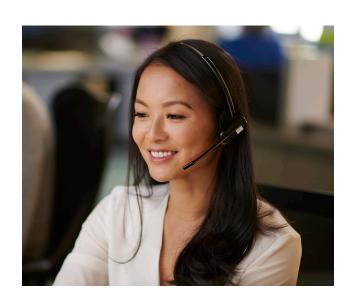
MHP is continuing its partnership with farmers markets throughout Michigan as part of our commitment to the health and wellness of our members. Many markets accept the Supplemental Nutrition Assistance Program (SNAP) benefits, which is a great way to get fresh foods while supporting local farmers. There's also the "Double Up Food Bucks" program where those with an active EBT/Bridge card (or SNAP recipients) can get a dollar-for-dollar match, up to \$10 a day, to purchase twice the fruits and vegetables! Look for us at a Farmers Market near you!

'STAY IN TOUCH' BY TAKING OUR SURVEY

We can better coordinate your care if our team at McLaren Health Plan (MHP) knows a little bit about your health and well-being before you start getting services. That's why we'd like you to complete our "Staying in Touch" survey. We will help you find the right health care services if you tell us about any health conditions or special needs you may have. Making sure you get the best care possible when you need it is important to MHP. This could mean continuing treatment with doctors you are already seeing. We also ask about family members and other factors in your life (stress, ER visits, lifestyle behaviors) that could affect your health. A nurse will contact you. if requested, to help coordinate the best care for your situation after you complete and return the survey. We're here to help.

The survey is on our website: McLarenHealthPlan. org, click on Health and Wellness then click on Staying in Touch program.

We can send you a paper copy to fill it out and mail back to us. Call Customer Service at 888-327-0671 (TTY:711) and we will mail it to you.



TAKE A LOOK: FREE PROGRAMS FROM MHP

Call 888-327-0671 (TTY: 711) for information about any of these programs or if you do not want to be in any of these programs. Go to McLarenHealthPlan.org and click on Health and Wellness to learn more about these programs.

Stop Smoking Quit Line

MHP offers support for members who use tobacco or who smoke. Members can call 800-784-8669 for free counseling. Your primary care provider also offers stop-smoking counseling services. Several prescription medications are available to help you. Talk to your doctor about what is best for you.

Here are some useful tips when you're trying to quit smoking.

List key triggers:

- Where and when do you smoke?
- Whom do you smoke with?

Seek help:

- The more help you get, the better your chances of success.
- Be motivated.

Set a stop date:

- Make it a day with low stress.
- Tell your family and friends you are quitting.

Did you know that AFTER you guit smoking:

- Your blood pressure and pulse become normal within 20 minutes.
- Your sense of smell and taste come back.
- The smell of your breath gets better and stained teeth get whiter.
- Your circulation will improve in two or three weeks.
- Smoker's cough and shortness of breath decrease.
- You'll live longer and have a lower risk of heart disease, stroke, lung disease and cancer.

Mammogram Incentive

Female members ages 50 and older who get a mammogram can receive a \$20 gift card. MHP sends eligible participants an entry form by mail to return to us once you've received your mammogram. You can also notify Customer Service at 888-327-0671 (TTY: 711) that you've received your mammogram. Once we receive a claim for your services, your gift card will be mailed to you.

Down With Hypertension

You can be a part of this program if your doctor says you have high blood pressure. All identified members will be mailed information about the program. MHP's pharmacists and nurses offer support to you by phone.

Case Management/Complex Case Management

Every MHP member has a case management nurse who will help you get the care and services you need to stay healthy and improve your health.

Your nurse will help you with difficult health problems and connect you with community support services.

Call your nurse if you think you need a second opinion. You can get a second opinion for an in-network provider. Your nurse can help if you want a second opinion from an out-of-network provider.

An approval is needed for a second opinion from an out-of-network provider. MHP will pay for the services as if they were provided in-network if the second opinion has been approved to the out-of-network provider.

MHP will help you get needed services from an outof-network provider in a timely manner if they are not available from an in-network provider. The services must be covered and medically necessary.

If the services are available from an in-network provider but cannot be delivered timely, MHP will help you get the needed services from an out-of- network provider. The services must be covered and medically necessary.

We will talk to you if you have serious medical problem. Call Customer Service at 888-327-0671 (TTY:711) and ask to speak to your nurse.

Diabetes and Asthma Management Programs

MHP has nurses who understand diabetes and asthma. They will work with you to help you understand your diabetes or asthma and provide you with support. Your nurse will keep your doctor informed of your condition and the services we are giving you. It is important you see your doctor regularly to discuss your care.

You will get

- Support from your nurse so you know the best ways to manage your condition and assess your health status
- Newsletters with the most up-to-date information about diabetes or asthma
- Materials that will help you understand and manage your medicine and plan visits to your doctor

You are enrolled in these programs as a free benefit of MHP. Membership in these programs is your choice. You do not have to join. Call us anytime if you don't want to be in the program.

See your doctor regularly if you have diabetes. Ask your doctor to do the following every year:

- An A1c blood test at least twice a year to check how well your blood sugar is being controlled
- Dilated eye exam (this is a covered benefit for members with diabetes)
- Foot exam
- Cholesterol blood check
- Body Mass Index (BMI)
- Urine test to check for kidney changes
- Blood pressure check

These tests are all covered by MHP.

You need a personal action plan to control your asthma. Go to www.webmd.com/asthma/guide/ smoking-and-asthma for tips on how to handle your asthma challenges, asthma triggers, and signs that an asthma attack is about to happen. (Note: Information on www. webmd.com does not replace medical advice from your doctor.)

McLaren Miracles

If you are pregnant, call MHP to enroll in our McLaren Miracles program and get a \$10 gift card. You'll talk to a nurse about your pregnancy and your baby's growth and development. You'll learn how to take care of yourself and your baby. Here are some other important things you should know if you're pregnant:

 Take folic acid as directed by your physician before and while you are pregnant to help prevent

birth defects.

 A flu shot is the best protection from illness for mother and baby.

Quit smoking and do not drink alcohol.

 Check with your doctor to make sure you can take your current medications while pregnant.

- Schedule your prenatal visit as soon as you find out you are pregnant. It is important to be seen during your first trimester.
- Go to all your prenatal visits; these are very important to track the health of you and your baby.
- See your doctor within six weeks after having a baby. This is a postpartum visit.

Your postpartum exam is important. You can receive a \$50 gift card if you get a postpartum exam within 7-84 days after delivery. Call Customer Service at 888-327-0671 (TTY: 711) after your postpartum exam is complete and let us know you've had your visit.

Once we receive your provider's claim, the gift card will be mailed to you. If you are a McLaren Health Plan Medicaid member over the age of 21, you have dental coverage. Call us at 888-327-0671 (TTY:711) for more information.

Taking It Off

Our MHP nurses are here to help you if you want to lose weight. Our "Taking it Off" program is for adults and children. Your nurse will provide you with:

- Educational materials mailed to your home at your request
- Phone calls to offer support
- Coordination with your PCP

Do you know your BMI? BMI stands for Body Mass Index. It measures a person's weight and height. It helps to estimate a healthy weight based on how tall a person is. BMI is the most ideal tool used to identify obesity problems. Ask to have your BMI checked next time to visit your doctor.

Membership in these programs is your choice. They're free benefits to you as a member of MHP. You do not have to join. Call us anytime if you don't want to be in any of these programs.

Depression: Eyes Wide Open

Eyes Wide Open is a McLaren Health Plan program for members with depression. The program goal is to improve the care of our members with depression by:

- Educating members and providers about the impact of depression
- Increasing screening for depression
- Promoting optimal treatment
- Increasing member compliance with treatment

Members with a diagnosis of depression are automatically enrolled in the Depression Management program. Members can become ineligible if they are incorrectly identified as having a depression diagnosis, are no longer an MHP member (termed/expired) or if the member chooses to opt out of the program. For questions or to opt out of this program, contact Customer Service toll free at 1-888-327-0671 (TTY: 711).

Sickle Cell

Your nurse can assist you with your needs related to Sickle Cell Disease by providing support, education, and resources to help manage your disease and improve your health. For questions or to opt out of this program, contact Customer Service toll free at 1-888-327-0671 (TTY: 711).

LGBTQIA+

MHP promotes a a culture of inclusivity and diversity of lived experience. Your nurse can assist you with resources and information to help you get the care you need. Contact Customer Service toll free at 1-888-327-0671 (TTY: 711) and ask for your nurse.

Chronic Kidney Disease

Chronic Kidney Disease is permanent kidney damage or decreased level of kidney function for three months or more; 33% of adults in the United States are at risk for kidney disease. That's 1 in every 3 people.

Of the estimated thirty million American adults with CKD, over 80% are unaware of the condition that increases their risk for cardiovascular events and progression to kidney failure and death. Almost 90% of adults with type-2 diabetes and CKD are not currently diagnosed, and as many as 50% of patients with advanced CKD (Stage G4) remain undiagnosed in primary care populations (National Kidney Foundation).

Diabetes and hypertension are the leading causes of Chronic Kidney Disease. Other risk factors include obesity, family history of CKD, history of acute kidney injury, patients over the age of 60, and being a member of a minority race or ethnicity.

 Because CKD is often asymptomatic, many patients are unaware they have the disease until it has

progressed to later stages.

 Early identification of CKD in your at-risk patients creates the opportunity to slow or prevent the progression of this disease and can result in decreased hospitalizations and costs.

Learn more about CKD, the 33% campaign, and your risks: https://www.kidney.org/phi/155274/awareness

IMPORTANT HEALTH AND WELLNESS VISITS FOR WOMEN



Put these needed appointments on your calendar

Women: Do you make doctor appointments for your kids, spouse, parents or siblings but forget to make them for yourself? Take the time to schedule the following visits with your doctor. Call Customer Service at 888-327-0671 (TTY: 711) if you need help scheduling any appointment. And don't forget — MHP members can see an in-network OB-GYN or certified nurse midwife for routine and preventive health care services without a referral. Women's routine and preventive health care services include prenatal and postpartum care, breast exams, mammograms and Pap tests.

Annual checkup

Make this appointment every year around your birthday. This way you won't forget to do it.

Ask your PCP questions. Your PCP will ask you questions about your family history and previous illnesses. Your vital signs will be taken, and your eyes, ears, heart and skin will be checked. Discuss specific health concerns you have. Schedule a mammogram, Pap screening or any blood tests you might need.

Pap screening for cervical cancer

Cervical cancer can affect any woman who is or has been sexually active. It occurs in women who have had the human papilloma virus, or HPV. Many people who are infected have no symptoms. HPV is passed during sex and is most common in women ages 20-24. You can reduce your chances of getting cervical cancer by getting routine Pap screenings and the HPV vaccine. This is a series of two shots given during a six-to-12-month period. If you or your daughter(s) is between the ages of 9 and 26 it is important to consider getting this series of shots. Ask your doctor if the HPV vaccine is right for you.

Get tested for chlamydia

All sexually active women should get tested every year for chlamydia. Why? It's a common sexually transmitted disease that can make women unable to get pregnant. It can harm newborn babies of infected mothers. It can cause serious problems. It's a disease both women and men can get. It's even more important for women under age 25 and males ages 16-18 to be tested. It is easy to get but the good news is it's easy to detect and treat. Most people with chlamydia have no symptoms. Your doctor can give you a simple urine test for chlamydia. The treatment for chlamydia is antibiotics. Your partner also should get tested and treated if necessary. Use a condom every time you have sex to help prevent chlamydia.

Breast health

Do a monthly self-exam of your breasts. Tell your doctor immediately if you notice any changes. For general breast health, maintain a healthy weight, limit alcohol and exercise regularly. All women can get breast cancer, even those with no family history of the disease. You have a higher chance of surviving when the cancer is diagnosed early. Get a mammogram every year beginning at age 50.

HIV PREVENTION

Pre-exposure prophylaxis (PrEP) is a medicine that can be taken to reduce a person's chances of getting HIV from sex or sharing drug injection equipment. PrEP is for people who do not have HIV but have the chance of getting it. When someone taking PrEP is exposed to HIV through sex or sharing drug injection equipment, the medicines can keep the virus from establishing a permanent infection. Taking PrEP as prescribed by a health care provider can reduce the chances of getting HIV by up to 99% from sex and by at least 74% from sharing drug injection equipment.

Medication also can be taken following a possible exposure to HIV to help prevent transmission of the virus. In such cases, the medications are referred to as post-exposure prophylaxis (PEP) Both PrEP and PEP can be prescribed by a doctor, physician assistant or nurse practitioner.

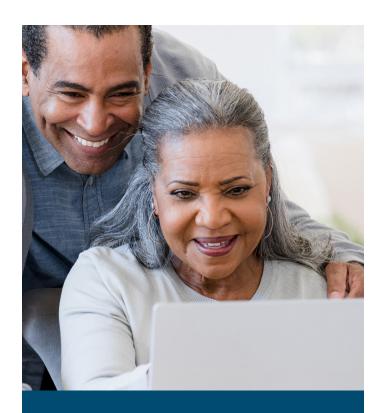
Learn more: https://www.michigan.gov/mdhhs/keep-mi-healthy/chronicdiseases/hivsti/prep?utm_campaign=&utm_medium=email&utm_source=govdelivery#miprep-michoice

To read stories from real people in Michigan who are using PrEP to prevent HIV, visit MIPrEP MIChoice.



SHOULD YOU BE SCREENED FOR HEPATITIS C?

Hepatitis C is a liver infection caused by the hepatitis C virus (HCV). It's contagious and symptoms may include jaundice, fatigue, nausea, fever and muscle aches. The good news is HCV is curable. McLaren Health Plan covers the drugs used to treat hepatitis C.



ONLINE TOOLS HELP MANAGE YOUR HEALTH

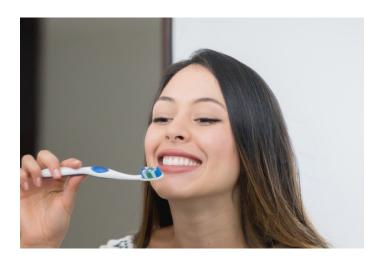
There are self-management tools online that can help you manage your health. They help provide insight about risk factors you may have for certain conditions. They can help reduce that risk and maintain low risk. The tools are interactive and focus on wellness and prevention. MHP offers self-management tools at www.McLarenHealthPlan.org; click on Health and Wellness, Call 888-327-0671 (TTY: 711) and ask to speak to your nurse for additional support. Go to www.webmd.com for health tips and wellness updates. Click on Health A-Z for risks, symptoms and treatments about how to maintain a healthy weight or how to quit smoking. There's also information about physical activity, eating healthy, how to manage stress, at-risk drinking and depression. Please remember, the advice received online does not replace the medical advice from your doctor.

NEW SUICIDE PREVENTION HOTLINE NUMBER AVAILABLE

When it comes to a mental health crisis, one call can save a life. Dial 988 to connect to the National Suicide Prevention Lifeline when seeking mental health assistance. Remember 988 the same way you remember 911 and teach your family and friends this number. Knowing whom to call during an emergency ensures people in crisis will get the help they need, when they need it.

Here are some resources to learn about warning signs and help raise awareness:

- World Suicide Prevention Month Toolkit
- HelpSheet: Suicide Awareness
- HelpSheet: Teen Suicide Awareness Back to School Toolkit
- Teen Mental Health Resources



CHANGES TO YOUR DENTAL COVERAGE

Delta Dental will require dentists to submit a prior authorization for deep cleanings, core build-ups, and crowns starting May 1, 2024. This means that your dentist must receive approval from Delta Dental before providing and charging for those services. Your dentist will submit the prior authorization. You will be notified of the approval or denial. For more information, visit www.deltadentalmi.com/Member/Plans/Medicaid-Medicare-Advantage/Healthy-Michigan-Plan.

TRANSITION TO ADULTHOOD

As your teen moves into adulthood, the thought of moving care from his or her pediatrician to an adult PCP can seem challenging. MHP can assist you and your teen with choosing an adult PCP. Please call us at 888-327-0671 (TTY: 711) and allow us to help with this transition of care.

TRANSITIONS OF CARE

Are you new to McLaren Health Plan (MHP)? If you are a new member, you can keep your out-of-network doctors and services for at least 90 days. This may help with your medical health, behavioral health and pharmacy drug needs.

You can keep seeing your current doctor through your pregnancy and postpartum. You can keep seeing your current doctor if you are getting care for certain chronic diseases. MHP will not approve ongoing care by an out-of-network doctor if:

- Your doctor only wants to keep an eye on an illness
- The doctor has an issue that could cause you harm
- The doctor says they will not see you any more
- You started seeing the doctor after you enrolled with MHP
- The doctor does not meet MHP's standards

Our transitions of Care Policy is posted on our website at Transitions of Care Policy | McLaren Health Plan McLaren Health Plan can help you choose new in-network doctors. We can also help you get the services you need. You or your doctor can call McLaren Health Plan at (888) 327-0671.

FIND OUT ABOUT MHP'S QUALITY PROGRAMS

McLaren Health Plan works hard to provide many free, quality programs for you. We look for ways to improve and we measure how we deliver services. One way is through scores we get based on the care you receive. Our main goal is to provide you with high quality health care that meets your needs. Go to www. mclarenhealthplan.org/medicaid-member/programs-mhp to view the Medicaid Key Quality Measures Update and the Quality Improvement Update.



CULTURALLY AND LINGUISTICALLY APPROPRIATE SERVICES

In addition to the previous programs for 2023, MHP is committed to providing you with inclusive and equitable health care. As part of this commitment, MHP will begin asking you about your race, ethnicity, preferred language, gender, sexual orientation, and pronouns. Having this information will help us make sure you have access to the highest quality of care based on your unique needs.

We want to be clear that providing this information is entirely voluntary, and you have the option to decline to answer any or all questions. We respect and honor the privacy and confidentiality of our members, and we will never share this information with anyone outside of our healthcare team without your explicit consent.

Thank you for your understanding and support as we work to provide the best possible care for you and your loved ones.

PATIENT ADVOCATE AND ADVANCE DIRECTIVE

McLaren Health Plan supports your right to file an Advance Directive according to Michigan law. This document is a written statement of your wishes for medical care. It explains, in advance, what treatments you want or don't want if you have a serious medical condition that prevents you from telling your provider how you want to be treated. Your health care representative also may make medical decisions on your behalf to carry out your wishes if you become incapacitated. Our plan cannot refuse care or otherwise discriminate against a member based on their decision to have or not have an Advance Directive.

The State of Michigan only recognizes an advance directive called a durable power of attorney for health care. To create one, you will need to choose a patient advocate.

This person carries out your wishes and makes decisions for you when you cannot. It is important to choose a person who you know and trust to be your advocate. Make sure you talk with the person to let them know what you want.

Talk to your family and primary care physician about your choices. File a copy of your advance directive with your other important papers. Give a copy to the person you designate as your patient advocate. Ask to have a copy placed in your medical record.



State Bar of Michigan - A Guide to Medical and Legal Decisions: Planning and Your Peace of Mind https://www.legislature.mi.gov/Publications/PeaceofMind.pdf

CaringInfo: Free templates for Michigan www.caringinfo.org/planning/advance-directives/by-state/michigan/

Michigan Power of Attorney Forms (free and downloadable) https://powerofattorney.com/michigan/

For complaints about how your provider follows your wishes, write or call:

Bureau of Health Professions (BHP), Complaint & Allegation Division P.O. Box 30670

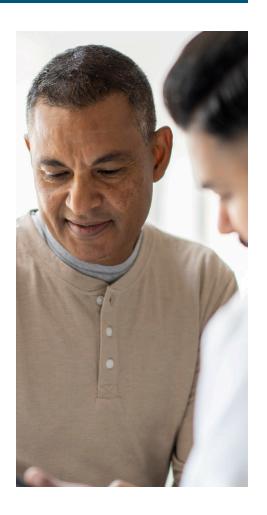
Lansing, MI 48909-8170

(517) 241-2389 or bhpinfo@michigan.gov

The BHP Complaint & Allegation website is www.michigan.gov/healthlicense (click on "file a complaint").

For complaints about how your health plan follows your wishes, write or call:

Michigan Department of Insurance and Financial Services Toll free at (877) 999-6442 or www.michigan.gov/difs



HOW MHP MAKES MEDICAL DECISIONS ABOUT YOUR CARE

McLaren Health Plan makes decisions about the use of medical services based on whether they are appropriate and a covered benefit. No one at MHP is rewarded in any way for making decisions to deny you medical services. That means doctors or employees. They are not rewarded in any way for encouraging underuse of your benefits. We want you to get the care you need. We will always look out for your best interests. Please call Customer Service if you have any questions.

APRIL IS NATIONAL MINORITY HEALTH MONTH

Celebrated every year in April, National Minority Health Month is a time to raise awareness about how important it is to improve the health of racial and ethnic minority communities.

National Negro Health Week was established in 1915 by Booker T. Washington. This was the beginning of what became National Minority Health Month established by U.S. Congress in 2002. The resolution encouraged "all health organizations and Americans to conduct appropriate programs and activities to promote healthfulness in minority and other communities experiencing health disparities."

At McLaren Health Plan, we work to eliminate health disparities in the way we write to you, talk to you and help you get care. Our plan doctors are trained to do the same. It's important to us so we make sure our staff receive training on implicit bias, health equity and culturally linguistically appropriate services.

With engagement, continuous improvement and accountability, we can make sure all people have access to quality health care as we build inclusion, reduce inequities and increase compassion.



HELP PREVENT FRAUD, WASTE AND ABUSE

McLaren Health Plan works hard to prevent fraud, waste and abuse. We follow state and federal laws about fraud, waste and abuse. Examples of fraud, waste and abuse by a member include:

- Changing a prescription form
- Changing medical records
- Changing referral forms
- Letting someone else use his or her MHP ID card to get health care benefits
- Resale of prescriptions

Examples of fraud, waste and abuse by a doctor include:

- Falsifying his or her credentials
- Billing for care not given
- Billing more than once for the same service
- Performing services that are not needed
- Not ordering services that are medically necessary
- Prescribing medicine that is not needed

Call MHP's Fraud and Abuse line at 866-866-2135 if you think a doctor, other health care provider or member might be committing fraud, waste or abuse. You can email MHP's Compliance department at MHPcompliance@McLaren.org.

You also can write to MHP at:

McLaren Health Plan Inc. Attn: Compliance P.O. Box 1511 Flint, MI 48501-1511



Contact the State of Michigan if you think a member has committed fraud, waste or abuse. Here's how:

- Fill out a fraud referral form at mdhhs. michigan.gov/Fraud/ OR
- Call the MDHHS office in the country where you think the fraud, waste or abuse took place OR
- Call the MDHHS office in the country where the member lives

Contact the Michigan Department of Health and Human Services Office of Inspector General if you think a doctor or other health care provider has committed fraud, waste or abuse. Here's how:

- Call them at 855-MI-FRAUD (855-643-7283)
 OR
- Send an email to MDHHS-OIG@michigan.gov OR
- Write to them at Office of Inspector General, P.O. Box 30062, Lansing, MI 48909

Help Protect Yourself From Fraud

You might be the target of a fraud scheme if you receive medical supplies that you or your doctor did not order.

Take action to protect your benefits:

- Refuse medical supplies you did not order
- Return unordered medical supplies that are shipped to your home
- Report companies that send you these items

Identity theft can lead to higher health care costs and personal financial loss. Don't let anybody steal your identity.

Current fraud schemes to be on the lookout for include:

- People using your health plan number for reimbursement of services you never received
- People calling you to ask for your health plan numbers
- People trying to bribe you to use a doctor you don't know to get services you may not need

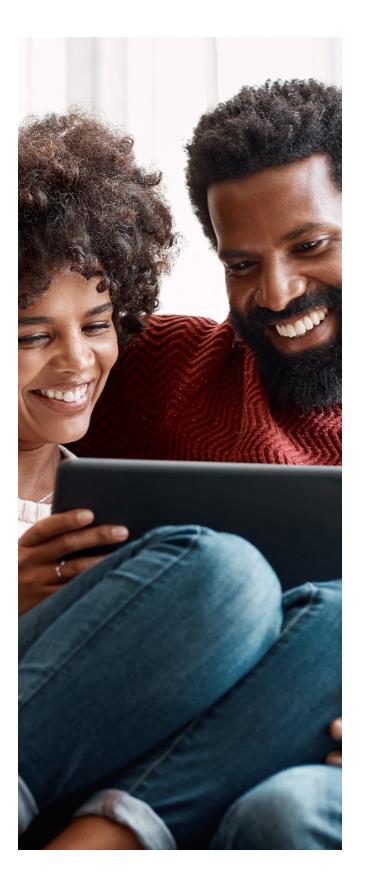
You are one of the first lines of defense against fraud. Do your part and report services or items that you have been billed for but did not receive.

- Review your plan explanations of benefits (EOBs) and bills from physicians
- Make sure you received the services or items billed
- Check the number of services billed
- Ensure the same service has not been billed more than once

Do Your Part!

- Never give out your Social Security number, health plan numbers or banking information to someone you do not know
- Carefully review your MHP Explanation of Benefits (EOBs) to ensure the information is correct
- Know that free services DO NOT require you to give your MHP ID number to anyone

Share this information with your friends. Please call Customer Service at 888-327-0671 (TTY: 711) to discuss benefit, coverage or claims payment concerns.



YOUR PRIVATE DATA AND HOW WE PROTECT IT

MHP has policies that cover who can see and use private data about you. This includes your race or ethnicity and what language you speak.

This is how MHP protects your data:

- We keep your paper documents in locked file cabinets.
- We keep electronic data on physically secure media.
- We keep electronic data in files with passwords.
- Only MHP staff who need to know this information will have it.

This is how MHP uses your data:

- To help with health care disparities
- To create programs to improve your health.
- To create outreach materials.
- To tell your provider about your language, cultural, or other needs that have to do with your care.
- To tell your provider to help improve health outcomes.

MHP will not use your data:

- For underwriting, setting rates or benefit decisions
- To give to those who shouldn't have it.

LET MHP KNOW WHAT YOU THINK

For Medicaid and Healthy Michigan members:

"Staying in Touch" member survey

You may get a survey in the mail or you may get a phone call asking how you like the service MHP offers and how we can improve our services. What you tell us is important. Please take the time to answer the survey and let us know what you think. You can complete this survey online if you want. Go to McLarenHealthPlan.org, click on "Are You a Member," choose your plan, click on "Health & Wellness," then "Staying in Touch Program."

For all McLaren Health Plan members: New member survey

MHP is interested in hearing about your needs and f inding ways we can better help you. If you haven't completed your survey yet, please visit www. mclarenhealthplan.org/mhp/member-survey-mhp. aspx to do so.

McLaren Health Plan works hard to provide you with the best possible service. Customer service, personal attention, quality care, easy access to care and free health programs are some reasons members stay with MHP. Our case managers are happy to help you with your medical needs.

Please call Customer Service at 888-327-0671 (TTY: 711) and tell us what we can do to better serve you!



G-3245 Beecher Road Flint, MI 48532

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